

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	MA		05-10-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12	5/29
FORMALITY REVIEW	MH	920	06-29-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	12/15/01
2	12/15/01
3	12/15/01
4	12/15/01
5	12/15/01
6	12/15/01
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8	12/15/01
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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10/29/01